

## HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY				
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STATE ETHUS COMMISS (				

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

	V. 7 P. G. G. T. T. T. G.	/	
PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Takayama	Linda	Chu	545-3060
MAILING ADDRESS (Street)			FAX
P.O. Box 1196			545-1182
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96807	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip	Code)

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE	
Imperium Renewables HAWAII LLC		341-8715	
MAILING ADDRESS (Street)		FAX	
1099 Alakea Street, Suite 1800		356-0697	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
David Leonard		341-8715	
MAILING ADDRESS (Street)		FAX	
1099 Alakea Street, Suite 1800		356-0697	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
☐ Agriculture	Education	☐ Human Services	Science, Technology & Economic Development			
Communications & Public Utilities	Government Operation & Finance	<ul><li>Intergovernmental Relations, International Affairs</li></ul>	☐ Tourism & Recreation			
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation			
Culture, Arts, Historic Preservation	☐ Health	<ul><li>Planning, Land &amp; Water Use Management</li></ul>	Other: (indicate below)			
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections				
<u></u>						
PART IV CERTIFICATIO						
hereby certify that the	e information furnished abov	e is, to the best of my knowled	ge, correct and complete.			
IIIII AM	3.20.07					
	(Signature of Lobbyist) (Date)		(Date)			
PART V AUTHORIZATI	ON TO LOBBY					
NAME		TITLE OF AUTHORIZING OFFICE	R OR PERSON REPRESENTED			
David Leonard CHIEF OPERATING OFFICER						
NAME OF ORGANIZATION (if a	pplicable)		TELEPHONE			
Imperium Renewables HAWAII LLC			341-8715			
MAILING ADDRESS (Street)			FAX			
1099 Alakea Street, Suite 1800		356-0697				
(City)	(State)	(	Zip Code)			
Honolulu	Hawaii	96813				
Lhereby authorize the above mamed person to engage in lobbying activities on behalf of the undersigned.						
3/16/07						
(Signature of Authorizing Officer or Person Represented) (Date)						